



**INSTRUCTIONS TO APPLICANT:** Complete and return with your application.

**EDUCATOR LICENSING**

**Phone Number:** (800) 266-1027

**Website:** <http://dpi.wi.gov/tepd>

This form is available at <http://dpi.wi.gov/tepd/applications.html>

**To the Applicant:**

Please complete this form (print or type) in its entirety and forward it to DPI with your license application. Refer to the personalized letter you received from DPI with your license.

I. APPLICANT INFORMATION	
Name Last, First, Middle, Other	Social Security Number* or File Number**
Address	
City, State, Zip	Telephone Number Area Code/No.

II. VERIFICATION OF STIPULATIONS		
To advance a license with stipulations, you must verify you have satisfied all stipulations previously cited by our office before you request another license. If a stipulation requires additional institutional endorsement, attach a PI-1612 Institutional Endorsement/Assurances Form.		
Identified Stipulation/Deficiency	Action Taken to Satisfy the Stipulation/Deficiency	Documentation
		<input type="checkbox"/> Attached <input type="checkbox"/> Mailed Separately***
		<input type="checkbox"/> Attached <input type="checkbox"/> Mailed Separately***
		<input type="checkbox"/> Attached <input type="checkbox"/> Mailed Separately***
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		<input type="checkbox"/> Attached <input type="checkbox"/> Mailed Separately***
		<input type="checkbox"/> Attached <input type="checkbox"/> Mailed Separately***

**TO THE BEST OF MY KNOWLEDGE**, all information presented on this form is accurate.

Signature of Applicant  ➤	Date Signed
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\* Collection of social security number is a requirement of s. 118.19(1m) and (1r). The social security number may be released to the Department of Justice, Department of Revenue, and the Department of Workforce Development. Such information is made available to these governmental agencies for official purposes only.

\*\* Your Educator File Number can be found on DPI's License Look-up at <http://dpi.wi.gov/tepd/lisearch.html>.

\*\*\* If any documentation is submitted separately, each item must include your full name and Educator File Number. Mail to: DPI Educator Licensing, P.O. Box 7841, Madison, WI 53707-7841.